Case 14-47393 Doc 1 Filed 09/18/14 Entered 09/18/14 10:02:37 Main Document

| B1 (Official Form 1)(04/13) | | Pa | <u> 1 of</u> | <u>49</u> | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|---------------------------|---------------------------------------------------------------|
| | States Bank tern District o | | | | | | Voluntary | Petition |
| Name of Debtor (if individual, enter Last, First, Williams, Linnie | , Middle): | | Name | of Joint De | ebtor (Spouse) |) (Last, First, | Middle): | |
| All Other Names used by the Debtor in the last (include married, maiden, and trade names): AKA Linnie Simmons | | | used by the J maiden, and | | n the last 8 years: | | | |
| Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all) xxx-xx-7425 | ayer I.D. (ITIN)/Com | plete EIN | Last for | our digits o | f Soc. Sec. or | Individual-T | axpayer I.D. (ITIN) N | o./Complete EIN |
| Street Address of Debtor (No. and Street, City, a 7001 Myron Saint Louis, MO | and State): | ZIP Code | Street | Address of | Joint Debtor | (No. and Str | eet, City, and State): | ZIP Code |
| County of Residence or of the Principal Place of Saint Louis | | 63121 | Count | y of Reside | ence or of the | Principal Pla | ice of Business: | |
| Mailing Address of Debtor (if different from str | eet address): | | Mailin | g Address | of Joint Debto | or (if differen | nt from street address): | |
| | Г | ZIP Code | 4 | | | | | ZIP Code |
| Location of Principal Assets of Business Debtor (if different from street address above): | | | 1 | | | | | |
| Type of Debtor (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.) Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending: Filing Fee (Check one box Filing Fee to be paid in installments (applicable to attach signed application for the court's considerat debtor is unable to pay fee except in installments. Form 3A. | (Checl Health Care Bu Single Asset Rin 11 U.S.C. § Railroad Stockbroker Commodity Br Clearing Bank Other Tax-Exe (Check bo) Debtor is a tax-exunder Title 26 of Code (the Internal) | check one Check one Check if: Check if: | on es). e box: otor is a sr otor is not | defined "incurr a perso nall business a small business | the P er 7 er 9 er 11 er 12 er 13 are primarily co l in 11 U.S.C. § ed by an individual, family, or l Chap debtor as defin | Checkinsumer debts, 101(8) as dual primarily household purp ter 11 Debto led in 11 U.S.C. lefined in 11 U.S.C. letted debts (exc.) | busin for pose." | ecognition eding ecognition oceeding are primarily ess debts. |
| Filing Fee waiver requested (applicable to chapter attach signed application for the court's considerat | | BB. Acc | lan is beir | ng filed with of the plan w | this petition. vere solicited process.C. § 1126(b). | epetition from | one or more classes of cr | editors, |
| Statistical/Administrative Information ☐ Debtor estimates that funds will be available ☐ Debtor estimates that, after any exempt prop there will be no funds available for distributions. | erty is excluded and | administrative | | es paid, | | THIS | SPACE IS FOR COURT | USE ONLY |
| 1- 49 99 199 999 | 1,000- 5,000 5,001- 10,000 | |] 5,001- 0,000 | 50,001- 100,000 | OVER 100,000 | | | |
| \$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1 million | \$1,000,001 \$10,000,001 to \$10 to \$50 million | to \$100 to |] 100,000,001 \$500 illion | \$500,000,001 to \$1 billion | | | | |
| \$0 to \$50,001 to \$100,001 to \$500,001 | \$1,000,001 \$10,000,001 to \$10 to \$50 | |] 100,000,001 \$500 | \$500,000,001 to \$1 billion | | | | |

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B1 (Official Form 1)(04/13) Pg 2 of 49 Page 2 Name of Debtor(s): Voluntary Petition Williams, Linnie (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: Eastern District of Missouri--Dismissed 10-47717 7/09/10 Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Rochelle D. Stanton **September 18, 2014** Signature of Attorney for Debtor(s) (Date) Rochelle D. Stanton 49641 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(04/13)

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Name of Debtor(s): Williams, Linnie

Voluntary Petition

(This page must be completed and filed in every case)

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Linnie Williams

Signature of Debtor Linnie Williams

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

September 18, 2014

Date

Signature of Attorney*

X /s/ Rochelle D. Stanton

Signature of Attorney for Debtor(s)

Rochelle D. Stanton 49641

Printed Name of Attorney for Debtor(s)

Rochelle D. Stanton

Firm Name

745 Old Frontenac Square Suite 202 Frontenac, MO 63131

Address

Email: rstanton@rochelledstanton.com 314-991-1559 Fax: 314-991-1183

Telephone Number

September 18, 2014

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signatures Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

Page 3

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Eastern District of Missouri

| In re | Linnie Williams | | Case No. | |
|-------|-----------------|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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| B 1D (Official Form 1, Exhibit D) (12/09) - Cont. | Page 2 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental mental deficiency so as to be incapable of realizing and making rational decisions with refinancial responsibilities.); ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the externable, after reasonable effort, to participate in a credit counseling briefing in person, by through the Internet.); ☐ Active military duty in a military combat zone. | espect to ent of being |
| ☐ 5. The United States trustee or bankruptcy administrator has determined that the credit requirement of 11 U.S.C. § 109(h) does not apply in this district. | counseling |
| I certify under penalty of perjury that the information provided above is true and c | orrect. |
| Signature of Debtor: /s/ Linnie Williams Linnie Williams | |
| Date: September 18, 2014 | |

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B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Eastern District of Missouri

| In re | Linnie Williams | | Case No. | | |
|-------|-----------------|--------|----------|---|--|
| - | | Debtor | , | | |
| | | | Chapter_ | 7 | |
| | | | * | | |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---------------------------------------------------------------------------------|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property | Yes | 1 | 75,500.00 | | |
| B - Personal Property | Yes | 3 | 3,190.00 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | 121,223.77 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 3 | | 8,898.14 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 2 | | | 3,175.00 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 2 | | | 3,213.15 |
| Total Number of Sheets of ALL Schedu | ıles | 16 | | | |
| | To | otal Assets | 78,690.00 | | |
| | | | Total Liabilities | 130,121.91 | |

B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Eastern District of Missouri

| In re | Linnie Williams | | Case No. | | |
|-------|-----------------|----------|----------|---|--|
| - | | Debtor , | | | |
| | | | Chapter | 7 | |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. \S 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---------------------------------------------------------------------------------------------------------------------|--------|
| Domestic Support Obligations (from Schedule E) | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00 |
| Student Loan Obligations (from Schedule F) | 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 |
| TOTAL | 0.00 |

State the following:

| Average Income (from Schedule I, Line 12) | 3,175.00 |
|--------------------------------------------------------------------------------------------|----------|
| Average Expenses (from Schedule J, Line 22) | 3,213.15 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 1,775.00 |

State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | 44,823.77 |
|----------------------------------------------------------------------------|------|-----------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | 0.00 |
| 4. Total from Schedule F | | 8,898.14 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | 53,721.91 |

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B6A (Official Form 6A) (12/07)

| In re | Linnie Williams | Case No. |
|-------|-----------------|----------|
| - | | , |
| | | L)ehtor |

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property Nature of Debtor's Wife, Property without Aff | | | 001 Myron Street. St. Louis. MO |
|------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------|
| Husband, Current Value of | Nature of Debtor's Interest in Property Nature of Debtor's Joint, Debtor's Interest in Property, without Deducting any Secured Amount of Debtor's Secured Cl | | Description and Location |

Sub-Total > 75,500.00 (Total of this page)

75,500.00 Total >

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

| In re | Linnie Williams | Case No |
|-------|-----------------|---------|
| - | | Debtor, |

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | Type of Property | N O Description and Location of Property E | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| 1. | Cash on hand | Cash on Hand | - | 10.00 |
| 2. | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | St. Louis Community Credit Union Checking/Savings | J | 10.00 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | x | | |
| 4. | Household goods and furnishings, including audio, video, and computer equipment. | Mis. Furniture, Washer & Dryer, 2, a 32" & 29" Televisions | J | 1,500.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | X | | |
| 6. | Wearing apparel. | Misc. Clothing | - | 150.00 |
| 7. | Furs and jewelry. | Pair Earrings and Misc. Jewelry | - | 120.00 |
| 8. | Firearms and sports, photographic, and other hobby equipment. | x | | |
| 9. | Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | X | | |
| 10. | Annuities. Itemize and name each issuer. | x | | |
| | | | | |

2 continuation sheets attached to the Schedule of Personal Property

1,790.00

Sub-Total >

(Total of this page)

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B6B (Official Form 6B) (12/07) - Cont.

| | re Linnie Williams | | Debtor | Case No. | |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------|---------------------------------------------|-------------------------------------------------------------------------------------------------|
| | | SCHEDU | ULE B - PERSONAL PROPER' (Continuation Sheet) | ГҮ | |
| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | х | | | |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | X | | | |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. | Accounts receivable. | X | | | |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | x | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars | | | | |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | x | | | |
| | | | | Sub-Tota of this page) | al > 0.00 |

Sheet __1__ of __2__ continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

| In re | Linnie Williams | Case No. |
|-------|-----------------|----------|
| | | Debtor |

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|----------------------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | Х | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories. | | 2001 Ford Taurus Sedan 4D SEL 20,000 MilesNeeds Engine work | - | 1,400.00 |
| 26. | Boats, motors, and accessories. | X | | | |
| 27. | Aircraft and accessories. | X | | | |
| 28. | Office equipment, furnishings, and supplies. | X | | | |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. | Inventory. | X | | | |
| 31. | Animals. | X | | | |
| 32. | Crops - growing or harvested. Give particulars. | X | | | |
| 33. | Farming equipment and implements. | X | | | |
| 34. | Farm supplies, chemicals, and feed. | X | | | |
| 35. | Other personal property of any kind not already listed. Itemize. | X | | | |

| Sub-Total > 1,400.00 (Total of this page) | Total > 3,190.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

| In re | Linnie Williams | Case No. |
|-------|-----------------|----------|
| | | Dahter |

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled under: | ☐ Check if debtor claims a homestead exemption that exceeds |
|-----------------------------------------------------------------|-------------------------------------------------------------------------------------|
| (Check one box) | \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafte |
| ☐ 11 U.S.C. §522(b)(2) | with respect to cases commenced on or after the date of adjustment.) |
| 11 U.S.C. §522(b)(3) | |

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|-----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------|-------------------------------------------------------------|
| Cash on Hand Cash on Hand | RSMo § 513.430.1(3) | 10.00 | 10.00 |
| Checking, Savings, or Other Financial Accounts, C St. Louis Community Credit Union Checking/Savings | Certificates of Deposit RSMo § 513.430.1(3) | 10.00 | 10.00 |
| Household Goods and Furnishings Mis. Furniture, Washer & Dryer, 2, a 32" & 29" Televisions | RSMo § 513.430.1(1) | 1,500.00 | 1,500.00 |
| Wearing Apparel Misc. Clothing | RSMo § 513.430.1(1) | 150.00 | 150.00 |
| <u>Furs and Jewelry</u> Pair Earrings and Misc. Jewelry | RSMo § 513.430.1(2) | 120.00 | 120.00 |
| <u>Automobiles, Trucks, Trailers, and Other Vehicles</u> 2001 Ford Taurus Sedan 4D SEL 120,000 MilesNeeds Engine work | RSMo § 513.430.1(5) | 2,075.00 | 1,400.00 |

Total: 3,865.00 3,190.00

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| R6D | Official | Form | 6D) | (12/07) |
|-------|----------|------|-----|---------|
| ו עטם | Official | гопп | ועט | (12/0/) |

| In re | Linnie Williams | Case No | |
|-------|-----------------|---------|--|
| _ | | Debtor | |

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| | _ | | | _ | _ | | i | |
|------------------------------------------------------------------------------------------------------|----------|--------|----------------------------------------------------------------------------------------------------------|-----------|--------------|-----------------|----------------------------------------------------------------------|---------------------------------|
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | W J | DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | COZH_ZGШZ | 77-07-D4 | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
| Account No. xxxx7963 | | | 3/2010 | Т | ATE | | | |
| Metropolitan St. Louis Sewer District P.O. Box 437 Saint Louis, MO 63166-0437 | | J | Statutory Lien 7001 Myron Street, St. Louis, MO 63121 | | D | | | |
| | ┸ | L | Value \$ 75,500.00 | | | | 1,843.57 | 1,843.57 |
| Account No. xxxxxx3321 Newcastle Mortgage Corp. 4708 Mercantile Drive Fort Worth, TX 76137 | x | J | 9/2006 Deed of Trust 7001 Myron Street, St. Louis, MO 63121 | | | | | |
| | | | Value \$ 75,500.00 | 1 | | | 118,480.20 | 42,980.20 |
| Account No. xxxxx7425 Sherman Auto Sales 4870 Natural Bridge Ave. Saint Louis, MO 63115 | | _ | Purchase Money Security 2001 Ford Taurus Sedan 4D SEL 120,000 MilesNeeds Engine work Value \$ 1,400.00 | | | | 900.00 | 0.00 |
| Account No. | | | Value \$ | | | | | |
| continuation sheets attached | | | (Total of t | Subt | | | 121,223.77 | 44,823.77 |
| | | | (Report on Summary of So | | `ota lule | | 121,223.77 | 44,823.77 |

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B6E (Official Form 6E) (4/13)

| In re | Linnie Williams | Case No. | |
|-------|-----------------|-------------|--|
| - | | , Debtor | |

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to

| priority listed on this Schedule E in the box labeled "I otals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report to total also on the Statistical Summary of Certain Liabilities and Related Data. |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
| ☐ Domestic support obligations |
| Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| ☐ Extensions of credit in an involuntary case |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| ☐ Wages, salaries, and commissions |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sa representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| ☐ Contributions to employee benefit plans |
| Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busing whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| ☐ Certain farmers and fishermen |
| Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| ☐ Deposits by individuals |
| Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| ☐ Taxes and certain other debts owed to governmental units |
| Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| ☐ Commitments to maintain the capital of an insured depository institution |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Fede Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). |
| ☐ Claims for death or personal injury while debtor was intoxicated |
| Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). |

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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| R6F | Official | Form | 6F) | (12/07) |
|-------|----------|----------|------|---------|
| DOL (| Official | I OI III | 01.) | (14/07) |

| In re | Linnie Williams | Case No. |
|-------|-----------------|----------|
| | | Debtor |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| ☐ Check this box if debtor has no creditors holding un | secured c | lain | ns to report on this Schedule F. | | | | |
|-----------------------------------------------------------------------------------------------------|-----------|--------|-----------------------------------------------------------------------------------------------|-----------|-----------------------|-----------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | H ISJO | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTLNGEN | UNLLQULDA | D I S P U T E D | AMOUNT OF CLAIN |
| Account No. xxxxx-x0225 | | | 2/2014 Utility Service | Ť | D A T E D | | |
| Ameren Missouri P.O.Box 66529 Saint Louis, MO 63166-6529 | | - | ounty dervice | | | | |
| Account No. www2650 | | | E/2040 | | | | 1,104.85 |
| Account No. xxx3658 | | | 5/2010 Personal Loan | | | | |
| Cash America 17 Triangle Park Cincinnati, OH 45246 | | - | | | | | |
| | | | | | | | 700.00 |
| Account No. xxxx0695 Diversified Adjustment Service 600 Coon Rapids Blvd. NW Minneapolis, MN 55433 | | - | 1/2010 Collection/Sprint | | | | |
| | | | | | | | 640.00 |
| Account No. xxxxxx0178 Laclede Gas Company Drawer 2 Saint Louis, MO 63171 | | - | 5/2010 Utility | | | | |
| | | | | | | | 1,150.00 |
| 2 continuation sheets attached | • | | (Total of | Sub | | | 3,594.85 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Linnie Williams | | Case No | |
|-------|-----------------|--------|---------|--|
| _ | | Debtor | | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CDEDITOD'S NAME | С | Hu | sband, Wife, Joint, or Community | Ç | U | D | |
|--------------------------------------------------------------------------------------------------------------|----------|-----|-----------------------------------------------------------------------------------------------------|-----|-------------|-------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | U C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | LIQUID | PUTED | AMOUNT OF CLAIM |
| Account No. 7425 | | | 6/2010 | 7 | A T E | | |
| Liberty PO Box 7247-0335 Philadelphia, PA 19170-0335 | | - | Medical | | D | | 449.00 |
| Account No. xx7976 MCA Management Co. P.O. Box 480 High Ridge, MO 63049 | | - | 3/2010 Returned Checks (#143 & #141) Schnucks Market | | | | 534.00 |
| Account No. xx-xxxx428-1 Missouri American Water P.O. Box 94551 Palatine, IL 60094-4551 | | _ | 2010 Services | | | | 415.29 |
| Account No. xxx7149 MRSI 2250 E Devon Ave., Ste. 352 Des Plaines, IL 60018 | | _ | 4/2009 Collection/SSM St. Mary's Health Center | | | | 73.00 |
| Account No. 2747, xxx9495 NCO Financial Systems P.O. Box 15636 Wilmington, DE 19850 | | _ | 11/2008, 3/2008 Collection/AT&T and St. Mary's HC PHY Billing | | | | 837.00 |
| Sheet no. <u>1</u> of <u>2</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | -4 | | (Total of | Sub | | | 2,308.29 |

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| R6F (| Official. | Form | 6F) | (12/07) | - Cont. |
|-------|-----------|------|-----|---------|---------|

| In re | Linnie Williams | Case No. | _ |
|-------|-----------------|----------|---|
| | | Debtor | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | CO | U | P | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-------------|-----------------------------------------------------------------------------------------------------|------------|-------------|----------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER | СОДШВНОК | J M H | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATE | DISPUTED | AMOUNT OF CLAIM |
| (See instructions above.) | Ř | С | 10 0020201 10 021011,00 011112. | E | D A | Þ | |
| Account No. xxxxx7425 | | | 5/2010 | Τ̈́ | Ϊ́Ε | | |
| | l | | Personal Loan | | D | | |
| Title Loan Co. d/b/a The Loan Machine | | | | | | | |
| 7060 Natural Bridge Rd. | | - | | | | | |
| Saint Louis, MO 63121 | | | | | | | |
| | | | | | | | |
| | | | | | | | 2,523.00 |
| Account No. x4769 | H | | 5/2010 | T | H | T | |
| The second tree is a se | l | | Personal Loan | | | | |
| Vincent's Jewelers and Loan, Inc. | | | | | | | |
| d/b/a Cash America Pawn of St. Louis | | - | | | | | |
| 1600 West 7th Street | | | | | | | |
| Fort Worth, TX 76102 | | | | | | | |
| | | | | | | | 472.00 |
| | | | | | | | 472.00 |
| Account No. | | | | | | | |
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| Account No. | Н | - | | + | ┢ | H | |
| Account ivo. | | | | | | | |
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| Account No. | | | | | | | |
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| | | | | | | | |
| | | | | | | 1 | |
| | | | | | | Ļ | |
| Sheet no. 2 of 2 sheets attached to Schedule of | | | | Sub | | | 2,995.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of | this | pag | ge) | |
| | | | | Т | ota | al | |
| | | | (Report on Summary of S | | | | 8,898.14 |

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B6G (Official Form 6G) (12/07)

| In re | Linnie Williams | Case No. |
|-------|-----------------|----------|
| _ | | Debtor |

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 14-47393 Doc 1 Filed 09/18/14 Entered 09/18/14 10:02:37 Main Document Pg 19 of 49

B6H (Official Form 6H) (12/07)

| In re | Linnie Williams | Case No |
|-------|-----------------|---------|
| | | Debtor, |

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

John W. Simmons 7001 Myron Saint Louis, MO 63121 Newcastle Mortgage Corp. 4708 Mercantile Drive Fort Worth, TX 76137

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| | | | | | | 1 | | | | | | |
|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|--------------------------------------------|---------------------|----------------|----------------------------------------|---------------------------|-----------------------------|-------------------|--|--|--|
| Fill | in this information to identify your c | ase: | | | | | | | | | | |
| Del | otor 1 Linnie Willia | ams | | | | | | | | | | |
| _ | otor 2 uuse, if filing) | | | | _ | | | | | | | |
| Uni | ted States Bankruptcy Court for the | EASTERN DISTRICT | OF MISSOURI | | | | | | | | | |
| | se number nown) | | - | | | Check if this is An amendo A supplem | ed filing ent showing | g post-petition | • | | | |
| 0 | fficial Form B 6I | | | | | MM / DD/ | | moving dato. | | | | |
| | chedule I: Your Inc | ome | | | | IVIIVI / DD/ | | | 12/13 | | | |
| sup spo atta | as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment | are married and not fili Ir spouse is not filing w | ng jointly, and your ith you, do not inclu | spouse ude infor | is liv mati | ring with you, inc on about your sp | lude inforrouse. If mo | nation abou ore space is | t your needed, | | | |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor : | 2 or non-fil | ing spouse | | | | |
| | If you have more than one job, attach a separate page with | Employment status | ■ Employed | , , | | | ☐ Employed ☐ Not employed | | | | | |
| | information about additional employers. | Occupation | □ Not employed | | | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Retired | | | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | | | | | |
| | | How long employed t | here? | | | | | | | | | |
| Par | t 2: Give Details About Mo | | | | | | | | | | | |
| Esti | mate monthly income as of the duse unless you are separated. | • | you have nothing to | report for | any | line, write \$0 in th | e space. Ind | clude your no | on-filing | | | |
| • | u or your non-filing spouse have m e space, attach a separate sheet to | | ombine the information | on for all | emp | oyers for that pers | on on the li | nes below. If | you need | | | |
| | | | | | | For Debtor 1 | | otor 2 or ng spouse | | | | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 0.00 | \$ | N/A | | | | |
| 3. | Estimate and list monthly over | ime pay. | | 3. | +\$ | 0.00 | +\$ | N/A | | | | |
| 4. | Calculate gross Income. Add li | ne 2 + line 3. | | 4. | \$ | 0.00 | \$ | N/A | | | | |

Official Form B 6I Schedule I: Your Income page 1

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| Debt | or 1 | Linnie Williams | _ | Case | number (if known) | | | |
|------|------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|----------------------|----------------------------------------------------------------------|----------------------------------------------------------|----------------------------------------|---------------------------------------|
| | Con | by line 4 here | 4. | Foi | Debtor 1 | | Debtor 2 or filing spouse N/A | |
| _ | - | | | Ť_ | 0.00 | <u> </u> | | <u> </u> |
| 5. | 5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h. | all payroll deductions: Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify: | 5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+ | \$ \$ \$ \$ \$ \$ \$ | 0.00 0.00 0.00 0.00 0.00 0.00 0.00 | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | N/A N/A N/A N/A N/A N/A | A A A A A |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 0.00 | \$ | N/ | A |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 0.00 | \$ | N/A | <u> </u> |
| 8. | 8a. 8b. 8c. 8d. 8e. 8f. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filling spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Social Security Pension or retirement income Other monthly income. Specify: Roomate Contribution | 8c. 8d. 8e. ce 8f. 8g. 8h.+ | | 0.00 0.00 0.00 0.00 0.00 1,400.00 0.00 1,775.00 | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | N/. N/. N/. N/. N/. N/. N/. | A A A A A A A A A A A A A A A A A A A |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ <u></u> | 3,175.00 | \$ | N | /A |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | | 3,175.00 + \$_ | | N/A = \$ | 3,175.00 |
| 11. | Incluothe Do r | te all other regular contributions to the expenses that you list in Schedu ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no cify: | ur depen ot availab | le to | pay expenses lis | • | Schedule J. 11. +\$ _ | 0.00 |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The rule that amount on the Summary of Schedules and Statistical Summary of Cerlies | | | | | . 12. \$ Comb | 3,175.00 bined |
| 13. | Do y | you expect an increase or decrease within the year after you file this form No. Yes Explain: | m? | | | | mont | hly income |

Official Form B 6I Schedule I: Your Income page 2

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| Fill | in this informa | ation to identify yo | our case: | | | | | |
|------------|-------------------------------------------------|------------------------------------------------------|-------------------------|--------------------------------------------------------------|--------------------------|------------|----------------------------------------------|--------------------------------------------------------|
| Deb | | Linnie Willia | | | | Che | eck if this is: | |
| | tor 2 | | | | | | | wing post-petition chapter |
| (Spc | ouse, if filing) | | | | | | 13 expenses as or | the following date: |
| Unite | ed States Bankr | ruptcy Court for the: | EASTE | RN DISTRICT OF MISSOL | JRI | | MM / DD / YYYY | |
| | e number nown) | | | | | | A separate filing for 2 maintains a separate | or Debtor 2 because Debtor arate household |
| | | rm B 6J | | | | | | |
| Sc | chedule | J: Your l | Expen | ises | | | | 12/13 |
| info | rmation. If m | | eded, atta | If two married people ar ch another sheet to this n. | | | | |
| Par 1. | t 1: Descri | ribe Your House | hold | | | | | |
| 1. | ■ No. Go to □ Yes. Doe | o line 2. es Debtor 2 live i | • | ate household? | | | | |
| 2. | Do you have | e dependents? | ■ No | | | | | |
| | Do not list D | ebtor 1 | ☐ Yes. | Fill out this information for each dependent | Dependent's relation | | Dependent's age | Does dependent live with you? |
| | Do not state dependents' | | | | | | | □ No □ Yes |
| 3. | expenses o | penses include f people other t d your depende | han 🗖 | No Yes | | | | □ res |
| exp app | imate your ex enses as of a licable date. | a date after the l | our bankru bankruptc | uptcy filing date unless y y is filed. If this is a supp | lemental <i>Schedule</i> | | | apter 13 case to report of the form and fill in the |
| the | | h assistance an | | government assistance i cluded it on <i>Schedule I:</i> Y | | | Your exp | enses |
| 4. | | or home owners and any rent for the | | ses for your residence. In | nclude first mortgag | e 4. | \$ | 815.15 |
| | If not include | ded in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | 0.00 |
| | | erty, homeowner's | s, or renter | 's insurance | | 4a. 4b. | · - | 0.00 |
| | | maintenance, re | | | | 4c. | · | 67.00 |
| | | owner's associat | | | | 4d. | \$ | 0.00 |
| 5. | Additional r | mortgage payme | ents for yo | our residence, such as ho | me equity loans | 5. | \$ | 0.00 |

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| Debtor 1 Linnie Willian | ns | Case number (if known) | |
|----------------------------------------|---------------------------------------------------------------------------------------------------------------|----------------------------------------|----------------------------|
| 6. Utilities: | | | |
| 6a. Electricity, heat | natural gas | 6a. \$ | 240.00 |
| • | arbage collection | 6b. \$ | 110.00 |
| - | phone, Internet, satellite, and cable services | 6c. \$ | 98.00 |
| 6d. Other. Specify: | priorie, interriot, automite, and dable dervices | 6d. \$ | 0.00 |
| Food and housekeer | ing cumpling | 7. \$ | |
| . Childcare and childre | • | 8. \$ | 500.00 |
| | | | 0.00 |
| . Clothing, laundry, an | - | 9. \$ | 120.00 |
| 0. Personal care produ | | 10. \$ | 150.00 |
| 1. Medical and dental e | • | 11. \$ | 300.00 |
| | de gas, maintenance, bus or train fare. | 12. \$ | 200.00 |
| Do not include car pay | ments. , recreation, newspapers, magazines, and books | 13. \$ | |
| | | · | 60.00 |
| | ons and religious donations | 14. \$ | 35.00 |
| Insurance. | ice deducted from your pay or included in lines 4 or 2 | 1 | |
| 15a. Life insurance | ice deducted from your pay or included in lines 4 or 2 | 5. 15a. \$ | 175.00 |
| 15b. Health insurance | Δ | 15b. \$ | 0.00 |
| 15c. Vehicle insuran | - | 15c. \$ | 72.00 |
| 15d. Other insurance | | 15d. \$ | |
| | taxes deducted from your pay or included in lines 4 c | | 0.00 |
| Specify: Personal I | * * * | 16. \$ | 16.00 |
| 7. Installment or lease | | | 10.00 |
| 17a. Car payments for | • | 17a. \$ | 100.00 |
| 17a. Car payments for | | 17a. \$ | 0.00 |
| 17c. Other. Specify: | or verille 2 | 17c. \$ | |
| | | 17d. \$ | 0.00 |
| 17d. Other. Specify: | | | 0.00 |
| | mony, maintenance, and support that you did not pay on line 5, <i>Schedule I, Your Income</i> (Official Fo | | 0.00 |
| | make to support others who do not live with you. | \$ | 0.00 |
| Specify: | mane to support suiters mis do not into mail your | 19. | 0.00 |
| · · · | xpenses not included in lines 4 or 5 of this form of | | |
| 20a. Mortgages on o | | 20a. \$ | 0.00 |
| 20b. Real estate taxe | | 20b. \$ | 0.00 |
| | owner's, or renter's insurance | 20c. \$ | 0.00 |
| • • | pair, and upkeep expenses | 20d. \$ | 0.00 |
| | ssociation or condominium dues | 20e. \$ | 0.00 |
| | | · - | |
| | omate Expenses: Personal Expenses | 21. +\$ | 140.00 |
| Postage | | | 15.00 |
| 2. Your monthly expens | ses. Add lines 4 through 21. | 22. \$ | 3,213.15 |
| The result is your mor | thly expenses. | | |
| 3. Calculate your montl | • • | | |
| _ | our combined monthly income) from Schedule I. | 23a. \$ | 3,175.00 |
| | hly expenses from line 22 above. | 23b\$ | 3,213.15 |
| | | · | -, |
| 23c. Subtract your m | onthly expenses from your monthly income. | | |
| | ur monthly net income. | 23c. \$ | -38.15 |
| • | • | - | |
| 4. Do you expect an inc | rease or decrease in your expenses within the year | ar after you file this form? | |
| | "out of a dorout of my our experience main and you | | |
| | ct to finish paying for your car loan within the year or do you e | spect your mortgage payment to increas | e or decrease because of a |
| modification to the terms | ct to finish paying for your car loan within the year or do you e | spect your mortgage payment to increas | e or decrease because of a |
| | ct to finish paying for your car loan within the year or do you e | spect your mortgage payment to increas | e or decrease because of a |

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Eastern District of Missouri

| In re | Linnie Williams | | Debtor(s) Case No Chapter | | 7 | |
|-------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|--------------------------------------------|---|---------------------|--|
| | | | | | | |
| | DECLARATION CONCERNING DEBTOR'S SCHEDULES DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR | | | | | |
| | | ty of perjury that I have read the foregoing and correct to the best of my knowledge, info | | | es, consisting of18 | |
| Date | September 18, 2014 | Signature | /s/ Linnie Williams Linnie Williams Debtor | s | | |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court Eastern District of Missouri

| In re | Linnie Williams | Case No. | | |
|-------|-----------------|-----------|---------|---|
| | | Debtor(s) | Chapter | 7 |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$28,575.00 2014 YTD: Both Social Security \$37,000.00 2013: Both Social Security \$37,000.00 2012: Both Social Security

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3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS**

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> **AMOUNT** DATES OF PAID OR PAYMENTS/

NAME AND ADDRESS OF CREDITOR

TRANSFERS

VALUE OF TRANSFERS AMOUNT STILL OWING

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF **PROCEEDING** COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY**

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION St. Joseph Baptist Church Saint Louis, MO 63121 RELATIONSHIP TO DEBTOR, IF ANY **Debtor's Church**

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

Monthly ongoing \$35.00 donation each month

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Rochelle D. Stanton Attorney At Law, Fed. Bar #70900 745 Old Frontenac Square, Ste. 202 Frontenac, MO 63131 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 9/2014 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
Debtor Paid \$299.00 Plus
Credit Counseling Fee and
partial filing fee

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

11. Closed financial accounts

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

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14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS

ENDING DATES

None

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

ADDRESS NAME

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

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20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY
DATE OF INVENTORY RECORDS

21 . Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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B7 (Official Form 7) (04/13)

Ω,

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | September 18, 2014 | Signature | /s/ Linnie Williams |
|------|--------------------|-----------|---------------------|
| | _ | | Linnie Williams |
| | | | Debtor |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

United States Bankruptcy Court Eastern District of Missouri

| In re | Linnie Williams | Case No. | | |
|-------|-----------------|-----------|---------|---|
| | | Debtor(s) | Chapter | 7 |

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Dabte secured by property of the actate (Part A must be fully completed for FACH dabt which is secured by

| Describe Property Securing Debt: 7001 Myron Street, St. Louis, MO 63121 |
|----------------------------------------------------------------------------|
| |
| |
| |
| |
| |
| |
| 1 lien using 11 U.S.C. § 522(f)). |
| |
| ☐ Not claimed as exempt |
| |
| Describe Property Securing Debt: 7001 Myron Street, St. Louis, MO 63121 |
| |
| |
| d lien using 11 U.S.C. § 522(f)). |
| |
| |
| |

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| | | _ | Page 2 |
|------------------------------------------------------------------------------------------------------|-----------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| Property No. 3 | | | |
| Creditor's Name: Sherman Auto Sales | | Describe Property Securing Debt: 2001 Ford Taurus Sedan 4D SEL 120,000 MilesNeeds Engine work | |
| Property will be (check one): | | _ <u> </u> | |
| ☐ Surrendered | ■ Retained | | |
| If retaining the property, I intend to ☐ Redeem the property ■ Reaffirm the debt ☐ Other. Explain | | oid lien using 11 U.S.C | C. § 522(f)). |
| | \ 1 / | C | |
| Property is (check one): ■ Claimed as Exempt □ Not claimed as exempt | | | emnt |
| PART B - Personal property subject | et to unexpired leases. (All thre | e columns of Part B mi | ast be completed for each unexpired lease. |
| Attach additional pages if necessary | | e columns of Part B mu | ast be completed for each unexpired lease. |
| | | | Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): |

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United States Bankruptcy Court Eastern District of Missouri

| In re | Linnie Williams | | Case No. | | | | |
|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------------------------|-------------------------------------|--|--|--|
| | | Debtor(s) | Chapter | 7 | | | |
| | DISCLOSURE OF COMPENSATI | ON OF ATTORNI | EY FOR DI | EBTOR(S) | | | |
| C | ursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I compensation paid to me within one year before the filing of the perendered on behalf of the debtor(s) in contemplation of or in contemplation. | etition in bankruptcy, or a | greed to be paid | to me, for services rendered or to | | | |
| | For legal services, I have agreed to accept | | \$ | 299.00 | | | |
| | Prior to the filing of this statement I have received | | \$ | 299.00 | | | |
| | Balance Due | | \$ | 0.00 | | | |
| 2. \$ | 167.50 of the filing fee has been paid. | | | | | | |
| 3. T | he source of the compensation paid to me was: | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | |
| 4. T | he source of compensation to be paid to me is: | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | |
| 5. | I have not agreed to share the above-disclosed compensation | with any other person unle | ss they are mem | bers and associates of my law firm. | | | |
| [| I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the | | | | | | |
| 6. In | n return for the above-disclosed fee, I have agreed to render lega | l service for all aspects of | the bankruptcy o | case, including: | | | |
| b. c. | Analysis of the debtor's financial situation, and rendering advi Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and co [Other provisions as needed] Negotiations with secured creditors to reduce to reaffirmation agreements and applications as no 522(f)(2)(A) for avoidance of liens on household | affairs and plan which may onfirmation hearing, and ar o market value; exemp eeded; preparation and | be required; y adjourned hea tion planning | arings thereof; | | | |
| 7. B | y agreement with the debtor(s), the above-disclosed fee does not Representation of the debtors in any discharged any other adversary proceeding. | | | es, relief from stay actions or | | | |
| | CERT | IFICATION | | | | | |
| | I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. | | | | | | |
| Dated: | September 18, 2014 | /s/ Rochelle D. Stanto | on | | | | |
| | · | Rochelle D. Stanton | | | | | |
| | | Rochelle D. Stanton 745 Old Frontenac Sc | guare | | | | |
| | | Suite 202 | - | | | | |
| | | Frontenac, MO 63131 314-991-1559 Fax: 3 | | | | | |
| | | rstanton@rochelleds | | | | | |

B 201A (Form 201A) (6/14)

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MISSOURI

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

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B 201B (Form 201B) (12/09)

United States Bankruptcy Court Eastern District of Missouri

| | Eastern District of Missouri | | |
|--------------------------------------------------|----------------------------------------------------------------------|--------------------|------------------------------|
| In re Linnie Williams | | Case No. | |
| | Debtor(s) | Chapter | 7 |
| | ON OF NOTICE TO CONSUME § 342(b) OF THE BANKRUPTCY | | (S) |
| I (We), the debtor(s), affirm that I (we Code. | Certification of Debtor) have received and read the attached notice | ce, as required by | y § 342(b) of the Bankruptcy |
| Linnie Williams | ${ m X}^{\prime}$ /s/ Linnie William | าร | September 18, 2014 |
| Printed Name(s) of Debtor(s) | Signature of Debt | or | Date |
| Case No. (if known) | X | | |
| | Signature of Joint | Debtor (if any) | Date |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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United States Bankruptcy Court Eastern District of Missouri

| In re L | innie Williams | | | Case No. | |
|----------|-----------------------------------------------|-----------|-------------------|----------|-----------------------------|
| | | Debtor(s) | s) | Chapter | 7 |
| | | | | | |
| | | | | | |
| | VERIFICATION | OF CRE | DITOR MATE | RIX | |
| | | | | | |
| т | The above governd debtor(a) house, contificat | /aant:6 | dan manaltus of m | | 4 4la a 44 a ala a d 15 a 4 |
| | The above named debtor(s) hereby certifies/ | • | | • • | |
| | ng the names and addresses of my creditors | (Mairix), | consisting of _ | z page(s |) and is true, correct and |
| complete | 2 . | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | Williams | | |
| | | Linnie W | illiams | | |
| | | Debtor | | | |
| | | | | | |
| | | | | | |
| | | Dated: | September 18, 2 | 014 | |

Internal Revenue Service P.O. Box 7317 c/o Missouri Cases Philadelphia, PA 19101-7317

Missouri Department Of Revenue General Counsels Office P.O.Box 475 Mail Stop 202 Jefferson City, MO 65105-0100

Ameren Missouri P.O.Box 66529 Saint Louis, MO 63166-6529

AT&T P. O. Box 930170 Dallas, TX 75393-0170

Cash America 17 Triangle Park Cincinnati, OH 45246

Diversified Adjustment Service 600 Coon Rapids Blvd. NW Minneapolis, MN 55433

Laclede Gas Company Drawer 2 Saint Louis, MO 63171

Liberty PO Box 7247-0335 Philadelphia, PA 19170-0335

MCA Management Co. P.O. Box 480 High Ridge, MO 63049

Metropolitan St. Louis Sewer District P.O. Box 437 Saint Louis, MO 63166-0437

Missouri American Water P.O. Box 94551 Palatine, IL 60094-4551

MRSI 2250 E Devon Ave., Ste. 352 Des Plaines, IL 60018

NCO Financial Systems P.O. Box 15636 Wilmington, DE 19850

Newcastle Mortgage Corp. 4708 Mercantile Drive Fort Worth, TX 76137

Randall E. Gusdorf 225 S. Meramec, Ste. 1220 Saint Louis, MO 63105

Sherman Auto Sales 4870 Natural Bridge Ave. Saint Louis, MO 63115

Sprint PCS P.O.Box 8077 London, KY 40742

SSM St.Mary's Health Center P.O.BOX 503671 Saint Louis, MO 63150-3671

Title Loan Co. d/b/a The Loan Machine 7060 Natural Bridge Rd. Saint Louis, MO 63121

Vincent's Jewelers and Loan, Inc. d/b/a Cash America Pawn of St. Louis 1600 West 7th Street Fort Worth, TX 76102

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B22A (Official Form 22A) (Chapter 7) (04/13)

| In re Linnie Williams | |
|------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| Debtor(s) Case Number: | According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement): |
| (If known) | ☐ The presumption arises. |
| | ■ The presumption does not arise. |
| | ☐ The presumption is temporarily inapplicable. |

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

| | Part I. MILITARY AND NON-CONSUMER DEBTORS |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1A | Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement. |
| 171 | □ Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)). |
| 1B | Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement. |
| | ☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts. |
| | Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends. |
| 1C | □ Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard |
| | a. I was called to active duty after September 11, 2001, for a period of at least 90 days and I remain on active duty /or/ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed; |
| | OR |
| | b. □ I am performing homeland defense activity for a period of at least 90 days /or/ □ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed. |

Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11. b. \square Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the 2 purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only column A ("Debtor's Income") for Lines 3-11. c. Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. All figures must reflect average monthly income received from all sources, derived during the six Column A Column B calendar months prior to filing the bankruptcy case, ending on the last day of the month before Debtor's Spouse's the filing. If the amount of monthly income varied during the six months, you must divide the **Income Income** six-month total by six, and enter the result on the appropriate line. Gross wages, salary, tips, bonuses, overtime, commissions. 3 0.00 | \$ Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V. Debtor Spouse Gross receipts 0.00 | \$ Ordinary and necessary business expenses \$ 0.00 \\$ Business income Subtract Line b from Line a 0.00 Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V. 5 Debtor Spouse Gross receipts 0.00 | \$ Ordinary and necessary operating expenses \$ 0.00 | \$ Rent and other real property income Subtract Line b from Line a 0.00 Interest, dividends, and royalties. 6 \$ 0.00 | \$ 7 \$ Pension and retirement income. 0.00 \$ Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that 8 purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. Each regular payment should be reported in only one column; 1,775.00 if a payment is listed in Column A, do not report that payment in Column B. **Unemployment compensation.** Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ **0.00** | Spouse \$ 0.00 | \$ **Income from all other sources.** Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or 10 domestic terrorism. Debtor Spouse \$ a. Total and enter on Line 10 0.00 Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if 11 1,775.00 Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).

| 12 | Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A. | | 1,775.00 |
|----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|------------------|
| | Part III. APPLICATION OF § 707(b)(7) EXCLUSION | | |
| 13 | Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result. | \$ | 21,300.00 |
| 14 | Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | |
| | a. Enter debtor's state of residence: MO b. Enter debtor's household size: 2 | \$ | 52,174.00 |
| | Application of Section 707(b)(7). Check the applicable box and proceed as directed. | | |
| 15 | ■ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII. | does no | ot arise" at the |
| | □ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement. | | |

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

| | Complete Parts IV, V, VI, and VII of | tins statement only if required | 1. (See Line 13.) | |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--|
| | Part IV. CALCULATION OF CURE | RENT MONTHLY INCOME I | FOR § 707(b)(2) | |
| 16 | Enter the amount from Line 12. | | \$ | |
| 17 | Marital adjustment. If you checked the box at Line 2.c, at Column B that was NOT paid on a regular basis for the hot dependents. Specify in the lines below the basis for exclusion spouse's tax liability or the spouse's support of persons of amount of income devoted to each purpose. If necessary, I not check box at Line 2.c, enter zero. a. b. c. d. Total and enter on Line 17 | ousehold expenses of the debtor or the d ding the Column B income (such as pay her than the debtor or the debtor's depen | lebtor's ment of the idents) and the | |
| 18 | Current monthly income for § 707(b)(2). Subtract Line | 17 from Line 16 and enter the result. | \$ | |
| | Part V. CALCULATION (| OF DEDUCTIONS FROM INC | COME | |
| | Subpart A: Deductions under Star | ndards of the Internal Revenue Se | rvice (IRS) | |
| 19A | m IRS National ation is available ons is the number r of any | | | |
| 19B | National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B. Persons under 65 years of age Persons 65 years of age or older Allowance per person Allowance per person | | | |
| | b1. Number of persons b | o2. Number of persons c2. Subtotal | \$ | |
| 20A | Local Standards: housing and utilities; non-mortgage of Utilities Standards; non-mortgage expenses for the application available at www.usdoj.gov/ust/ or from the clerk of the buthen umber that would currently be allowed as exemptions any additional dependents whom you support. | expenses. Enter the amount of the IRS able county and family size. (This information and the applicable family) | Housing and mation is size consists of | |

| 20B | Local Standards: housing and utilities; mortgage/rent expense. E Housing and Utilities Standards; mortgage/rent expense for your cour available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy of the number that would currently be allowed as exemptions on your fe any additional dependents whom you support); enter on Line b the to debts secured by your home, as stated in Line 42; subtract Line b from not enter an amount less than zero. a. IRS Housing and Utilities Standards; mortgage/rental expense b. Average Monthly Payment for any debts secured by your | nty and family size (this information is ourt) (the applicable family size consists of deral income tax return, plus the number of tal of the Average Monthly Payments for any in Line a and enter the result in Line 20B. Do | | |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--|
| | home, if any, as stated in Line 42 c. Net mortgage/rental expense | \$ Subtract Line b from Line a. | \$ | |
| 21 | Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: | | | |
| 22A | Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8. \[\begin{array}{c} 0 & \lefta 1 & \lefta 2 \text{ or more.} \] If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | |
| 22B | Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | |
| 23 | Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an owner vehicles.) □ 1 □ 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 1, as stated in Lite result in Line 23. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42 c. Net ownership/lease expense for Vehicle 1 | ship/lease expense for more than two e IRS Local Standards: Transportation court); enter in Line b the total of the Average | \$ | |
| 24 | Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 24. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 c. Net ownership/lease expense for Vehicle 2 | e IRS Local Standards: Transportation court); enter in Line b the total of the Average | \$ | |
| 25 | Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. | | | |

| 26 | Other Necessary Expenses: involuntary deductions deductions that are required for your employment, such Do not include discretionary amounts, such as volunt | \$ | | |
|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--|
| 27 | ine insurance for yourself. Do not include premiums for insurance on your dependents, for whole me of for | | | |
| | any other form of insurance. | | \$ | |
| 20 | | 5. Enter the total monthly amount that you are required to | | |
| 28 | | gency, such as spousal or child support payments. Do not | | |
| | include payments on past due obligations included in | n Line 44. | \$ | |
| 29 | the total average monthly amount that you actually exp | ent or for a physically or mentally challenged child. Enter bend for education that is a condition of employment and for challenged dependent child for whom no public education | \$ | |
| | Other Neessan Francisco children Francisco the tate | 1 | | |
| 30 | | preschool. Do not include other educational payments. | \$ | |
| | | tal average monthly amount that you actually expend on | | |
| 31 | | f yourself or your dependents, that is not reimbursed by is in excess of the amount entered in Line 19B. Do not | | |
| | include payments for health insurance or health sav | | \$ | |
| <u> </u> | | | Ψ | |
| | Other Necessary Expenses: telecommunication servi | | | |
| 32 | | your basic home telephone and cell phone service - such as internet service - to the extent necessary for your health and | | |
| | welfare or that of your dependents. Do not include any | | \$ | |
| 22 | | - | | |
| 33 | Total Expenses Allowed under IRS Standards. Ente | er the total of Lines 19 through 32. | \$ | |
| | Subpart B: Additi | onal Living Expense Deductions | | |
| | - | spenses that you have listed in Lines 19-32 | | |
| | | • | | |
| | Health Insurance, Disability Insurance, and Health the categories set out in lines a-c below that are reason dependents. | Savings Account Expenses. List the monthly expenses in ably necessary for yourself, your spouse, or your | | |
| 34 | a. Health Insurance | \$ | | |
| | b. Disability Insurance | \$ | | |
| | | \$ | ¢ | |
| | c. Health Savings Account | \$ | \$ | |
| | Total and enter on Line 34. | | | |
| | | e your actual total average monthly expenditures in the space | | |
| | below: | | | |
| | \$ | | | |
| 35 | ill, or disabled member of your household or member of your immediate family who is unable to pay for such | | | |
| <u> </u> | expenses. | | \$ | |
| 26 | Protection against family violence. Enter the total ave | | | |
| 36 | | under the Family Violence Prevention and Services Act or | | |
| | other applicable federal law. The nature of these expen | ises is required to be kept confidential by the court. | \$ | |
| 37 | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. | | | |
| | - | | \$ | |
| | | 18. Enter the total average monthly expenses that you | | |
| 38 | actually incur, not to exceed \$156.25* per child, for att | | | |
| | | | | |
| | school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and | | | |
| | documentation of your actual expenses, and you mu necessary and not already accounted for in the IRS | | \$ | |

 $^{^{*}}$ Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| 39 | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. | | | \$ | | | |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------------------|-----------------------------|----|
| 40 | | | Enter the amount that you will continuous that you will continuous as defined in 26 U.S.C. § | | | e form of cash or | \$ |
| 41 | Tota | l Additional Expense Deductio | ns under § 707(b). Enter the total of | Line | s 34 through 40 | | \$ |
| | | , | Subpart C: Deductions for De | ebt | Payment | | |
| 42 | Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42. | | | | | | |
| | | Name of Creditor | Property Securing the Debt | | Average Monthly Payment | include taxes or insurance? | |
| | a. | | | \$ | Total: Add Lines | □yes □no | \$ |
| 43 | Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor | | | | | | |
| 44 | Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28. | | | | | \$ | |
| | | | s. If you are eligible to file a case under the amount in line b, and enter the re | | | | |
| 45 | a. b. | issued by the Executive Office information is available at we the bankruptcy court.) | hapter 13 plan payment. istrict as determined under schedules the for United States Trustees. (This www.usdoj.gov/ust/ or from the clerk of the expense of chapter 13 case | X | otal: Multiply Line | es a and b | \$ |
| 46 | Total Deductions for Debt Payment. Enter the total of Lines 42 through 45. | | | | \$ | | |
| | | S | Subpart D: Total Deductions | fror | n Income | | |
| 47 | Tota | l of all deductions allowed und | er § 707(b)(2). Enter the total of Line | s 33, | 41, and 46. | | \$ |
| | | Part VI. D | ETERMINATION OF § 707(| b)(2 | 2) PRESUMP | ΓΙΟΝ | |
| 48 | Ente | r the amount from Line 18 (Cu | arrent monthly income for § 707(b)(2 | 2)) | | | \$ |
| 49 | Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2)) | | | \$ | | | |
| 50 | Mon | thly disposable income under § | 707(b)(2). Subtract Line 49 from Lin | e 48 | and enter the resu | ılt. | \$ |
| 51 | 60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result. | | | \$ | | | |

| | Initial presumption determination. Check the applicable box and proceed as directions of the control of the con | ected. | | |
|---------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-------------------------|--|
| 52 | ☐ The amount on Line 51 is less than \$7,475*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI. | | | |
| 32 | ☐ The amount set forth on Line 51 is more than \$12,475* Check the box for " statement, and complete the verification in Part VIII. You may also complete Par | | | |
| | ☐ The amount on Line 51 is at least \$7,475*, but not more than \$12,475*. Co | mplete the remainder of Part VI (L | ines 53 through 55). | |
| 53 | Enter the amount of your total non-priority unsecured debt | | \$ | |
| 54 | Threshold debt payment amount. Multiply the amount in Line 53 by the number | r 0.25 and enter the result. | \$ | |
| | Secondary presumption determination. Check the applicable box and proceed a | s directed. | | |
| 55 | ☐ The amount on Line 51 is less than the amount on Line 54. Check the box for this statement, and complete the verification in Part VIII. | for "The presumption does not aris | e" at the top of page 1 | |
| | ☐ The amount on Line 51 is equal to or greater than the amount on Line 54. of page 1 of this statement, and complete the verification in Part VIII. You may a | | on arises" at the top | |
| | Part VII. ADDITIONAL EXPENSE | CLAIMS | | |
| 56 | Other Expenses. List and describe any monthly expenses, not otherwise stated in you and your family and that you contend should be an additional deduction from 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All fi each item. Total the expenses. | your current monthly income und | er § | |
| | Expense Description | Monthly Amou | nt | |
| | a. | \$ | | |
| | b. | \$ | | |
| | c. | \$ | | |
| | d. | \$ | _ | |
| | Total: Add Lines a, b, c, and d | \$ | | |
| | Part VIII. VERIFICATION | Ī | | |
| | I declare under penalty of perjury that the information provided in this statement i | s true and correct. (If this is a join | t case, both debtors | |
| 57 Must sign.) Date: September 18, 2014 Signature: Is/ Linnie Williams (Debtor) | | | | |
| | | | | |

^{*} Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 03/01/2014 to 08/31/2014.

Line 8 - Contributions to household expenses of the debtor or dependents

Source of Income: **Roommate Contribution** Constant income of **\$1,775.00** per month.

Non-CMI - Social Security Act Income

Source of Income: Social Security Retirement Benefits

Constant income of \$1,400.00 per month.